DECLARATION FOR NON-PROVISIONAL PATENT APPLICATION*

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. beneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled:

GOLF BALL COMPRISING A PLASTICIZED POLYURETHANE

nd for which a patent application:				
is attached hereto		.1 (/.)	£1 - 1	
was filed in the United States on as A	pplication No. (for declaration not ac	companying application) With amendment(s)	filed on (if applicable)	
was filed as PCT international Applic	ation No on and was amer	ided under PCT Article 19 on (if appl	(icable)	
		t to attend and the second and so do	matha alaima ag ama	ndad by an
was filed in the United States on as A was filed as PCT international Applic hereby state that I have reviewed and und	erstand the contents of the ar	bove identified application, including	ng me ciams, as ame	nucu by an
amendment referred to above.				
I acknowledge the duty to disclose information	ution Impuum to me to he mate	rial to natentability as defined in 3	7 C.F.R. 8 1.56.	
acknowledge the duty to disclose informa	tion known to me to be mate	mar to patentaomity as defined in s	7 0.1 .11. 3 1.0 0.	
I hereby claim foreign priority benefits und	ler 35 U.S.C. \$119(a)-(d) of	any foreign application(s) for pater	nt or inventor's certific	cate listed
below and have also identified below any	foreign application for patent	or inventor's certificate having a fi	ling date before that	of the
application on which priority is claimed:	orotgii appiroation for parent	0	J	
application on witten priority to classica.				
EARLIEST FOREIGN APPLIC	'ATION(S), IF ANY, FILED	PRIOR TO THE FILING DATE	OF THE APPLICATI	ON
			PRIORITY CLAIMED	
APPLICATION NUMBER	COUNTRY	DATE OF FILING	Y	N
	<u></u>			
I hereby claim the benefit under 35 U.S.C	§ 119(e) of any United Sta	tes provisional application(s) listed	i below.	
PROMINIONAL APPLICATION NUMBER		FILING DATE		
PROVISIONAL APPLICATION NUMBER				

^{*} for use only when the application is assigned to a company, partnership or other organization.

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information known to me which is material to patentability as defined in 37 C.F.R. § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

NON-PROVISIONAL APPLICATION SERIAL NO.	FILING DATE	STATUS			
		PATENTED	PENDING	ABANDONED	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

2 0 1	DYLL NAME	LAST NAME	FIRST NAME	MIDDLE INITIAL J	
	FULL NAME OF INVENTOR	Sullivan	Michael		
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
		Barrington	RI	USA	
	POST OFFICE ADDRESS	STREET	CITY	STATE	ZIP CODE
		3 River Oak Road	Barrington	RI	02806
	SIGNATURE OF INVENTO	OR 201, Michael J Sullivan		DATE	- 3 - 5
	much Sull.			Juny 23, 200	
		LAST NAME	FIRST NAME	MIDDLE INITIAL	
2 0 2	FULL NAME OF INVENTOR				
		CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	RESIDENCE & CITIZENSHIP				
		STREET	CITY	STATE	ZIP CODE
	POST OFFICE ADDRESS				
	SIGNATURE OF INVENTO	OR 202, (inventor name)		DATE	
		LAST NAME	FIRST NAME	MIDDLE INITIAL	
2 0 3	FULL NAME OF INVENTOR				
		CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	RESIDENCE & CITIZENSHIP				
		STREET	CITY	STATE	ZIP CODE
	POST OFFICE ADDRESS				
	SIGNATURE OF INVENT	OR 203. (inventor name)		DATE	